

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mc</i>		8/11/02
O.I.P.E. CLASSIFIER	<i>nd</i>	45	
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)..... Canceled                      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

Claim	Date
Final	
Original	
1	9/16/01
2	11/15/01
3	1/3/02
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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